

Your Name: _____
Your Address: _____
Your City, State, Zip Code: _____
Your Telephone Number: _____
Attorney Bar Number (if applicable): _____
Representing ☐ Self or ☐ Attorney for _____

**SUPERIOR COURT OF ARIZONA
MARICOPA COUNTY**

In the Matter of _____

Case Number PB: _____

A Deceased Person

**RESPONSE TO COURT ACCOUNTANT
REPORT FINAL ACCOUNTING OF
PERSONAL REPRESENTATIVE**

State of Arizona)
County of Maricopa) ss.

I am the person responsible for submitting the accounting. I respond under oath to the court accountant report as follows: (Be sure to address each point raised by the court accountant or the judge in the Order. Attach an amended accounting and supporting documents, if required. Do not attach bond, bond riders, or proof of restricted account -- file these separately. Use additional paper if necessary.)

SIGNED: _____

Subscribed and sworn to before me this date: _____ by _____
(Month/Day/Year)

My Commission Expires: _____

NOTARY PUBLIC: _____

Copy of the foregoing mailed this date: _____, to the following individuals at the following addresses:

